

CLAIMS ONLY							Application Number <b>16/685232</b>	Filing Date
							Applicant(s)	
* May be used for additional claims or amendments								
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT			
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1								
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Total Indep	5							
Total Depend	11							
Total Claims	16							

Application Number 101685232	Filing Date
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Applicant(s) \_\_\_\_\_

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